

Testimony on Sub. HB 49 for June 14, 2017 TO: Senate Finance Committee FROM: Sue Ciarlariello <u>ciarlariellos@childrensdayton.org</u> Legislative Chair, Ohio Society for Respiratory Care

Chairman Oelslager, Ranking Minority Member Skindell, and distinguished members of the Senate Finance Committee,

The Ohio Society for Respiratory Care had hoped that the Ohio Respiratory Care Board would remain an independent board in the Senate version of the budget bill released this week. However, the Senate version is consistent with the House version which abolishes the ORCB and replaces it with an advisory council under the Ohio Medical Board.

We now respectfully ask that an amendment be introduced that would add meaningful qualifications for the respiratory advisory council members and define council responsibilities, authority and permanence under the Ohio State Medical Board.

In Sub. H.B. 49, RCP's will have no direct voice on the Medical Board, only an advisory council. The advisory council structure and membership language currently does not require meaningful qualifications for education, training or actual practice experience in pulmonary medicine or respiratory care, only members "knowledgeable in respiratory care". We believe an advisory council charged with giving advice on the practice of respiratory care should be appointed from amongst those licensed RCP's who are the subject of regulation and physicians who manage respiratory disease. There is no provision for nominating candidates. And the responsibility, authority and permanence of this advisory council is left out.

The Ohio Medical Board is made up exclusively of physicians and consumer members who will be hearing RCP disciplinary cases and deciding their outcome. Respiratory Care Professionals provide life support to the most critical of patients in Ohio. The OSRC strongly believes licensees will be at a significant disadvantage when they appear before the board of doctors and public members who only have limited knowledge of the RCP's scope of practice, technical procedures, equipment and educational requirements. We believe this will seriously weaken the effectiveness of RCP regulation without experts within the OSMB to advise on action.

Attached is draft language to add meaningful qualifications for the advisory council members and define the responsibilities, authority and permanence of the council for your consideration. This draft language is a modification of sections 4730.05 and 4730.06, current language which defines the Physician Assistant Policy Committee as it exists under the Ohio State Medical Board and is similar to the language for the Dietician's advisory council as it will exist under the OSMB added in the Senate version.

Thank you for your consideration in this matter.

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